

NEW HAMPSHIRE
DEPARTMENT OF STATE

State of New Hampshire
Signature Form for Associated Lobbyist
RSA Chapter 15

Use this form to swear or affirm the truth and completeness of
Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist
Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation: Bianco Professional Association

Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): American Cancer Society Cancer Action Network

Date of Report (check one):

April 26, 2017 ☐ July 26, 2017 ☐ October 25, 2017 ☐ January 31, 2018 ☒

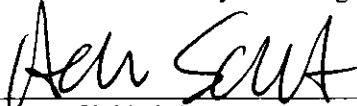
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):

 0 Addendum A(s).

 Addendum B(s).

 Addendum C(s).

I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.


(Signature of lobbyist)

11/29/18
(Date)

Adam Schmidt
(Print Name of lobbyist)

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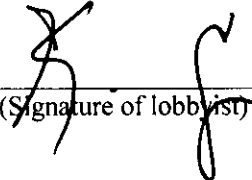
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(Signature of lobbyist)

1/24/18
(Date)

Karen Soucy
(Print Name of lobbyist)

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(Signature of lobbyist)

01/24/2018
(Date)

Kathy Corey Fox

(Print Name of lobbyist)